

APPLICATION DATA SHEET**Application Information**

Application Number::

Filing Date::

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification::

Suggested Group Art Unit::

CD-ROM or CD-R?: None

Number of CD Disks::

Number of Copies of CDs::

Sequence Submission?:

Computer Readable Form (CRF)? No

Number of Copies of CRF::

Title:: STABILIZER CONTROL APPARATUS

Attorney Docket Number:: 1012778-000159

Request for Early Publication?: No

Request for Non-Publication?: No

Suggested Drawing Figure::

Total Drawing Sheets:: 12

Small Entity?: No

Latin Name::

Variety Denomination Name::

Petition Included?: No

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Japan

Status:: Full Capacity

Given Name:: Yoshiyuki

Middle Name::

Family Name:: YASUI

Name Suffix::

City of Residence:: Nagoya-shi

State or Province of Residence:: Aichi-ken

Country of Residence:: Japan

Street of Mailing Address:: c/o AISIN SEIKI KABUSHIKI KAISHA,
1, Asahi-machi 2-chome

City of Mailing Address:: Kariya-shi

State or Province of Mailing
Address:: Aichi-ken

Country of Mailing Address:: Japan

Postal or Zip Code of Mailing
Address:: 448-8650

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Yuuki
Middle Name::	
Family Name::	OHTA
Name Suffix::	
City of Residence::	Kariya-shi
State or Province of Residence::	Aichi-ken
Country of Residence::	Japan
Street of Mailing Address::	c/o AISIN SEIKI KABUSHIKI KAISHA, 1, Asahi-machi 2-chome
City of Mailing Address::	Kariya-shi
State or Province of Mailing Address::	Aichi-ken
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	448-8650
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Japan
Status::	Full Capacity
Given Name::	Daisuke
Middle Name::	
Family Name::	YAMADA
Name Suffix::	

City of Residence:: Anjo-shi
State or Province of Residence:: Aichi-ken
Country of Residence:: Japan
Street of Mailing Address:: c/o AISIN SEIKI KABUSHIKI KAISHA,
1, Asahi-machi 2-chome
City of Mailing Address:: Kariya-shi
State or Province of Mailing Address:: Aichi-ken
Country of Mailing Address:: Japan
Postal or Zip Code of Mailing Address:: 448-8650

Correspondence Information

Correspondence Customer Number:: 21839
Phone Number:: (703) 836-6620
Fax Number: (703) 836-2021

Representative Information

Representative Customer Number:: 21839

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/JP2005/002071	02/10/2005

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
Japan	2004-034501	02/12/2004	Yes

Assignee Information

Assignee Name::	AISIN SEIKI KABUSHIKI KAISHA
Street of Mailing Address::	1, Asahi-machi 2-chome
City of Mailing Address::	Kariya-shi
State or Province of Mailing Address::	Aichi-ken
Country of Mailing Address::	Japan
Postal or Zip Code of Mailing Address::	448-8650